



VERIFICATION OF VA BENEFIT-RELATED INDEBTEDNESS

PRIVACY ACT INFORMATION: This information is to be used by the agency collecting it in determining whether you qualify for the VA loan benefit. This information request is authorized by Title 38, U.S.C., Chapter 37. Responses may be disclosed outside VA only if the disclosure is authorized under the Privacy Act, including the routine uses identified in the VA system of records, 55VA26, Loan Guaranty Home, Condominium and Manufactured Home Loan Applicant Records, Specially Adapted Housing Applicant Records and Vendee Loan Applicant Records - VA, published in the Federal Register.

TO: NAME AND ADDRESS OF LENDER

INSTRUCTIONS TO LENDER

Complete Items 1 through 6. Have veteran complete Items 7 and 8. Forward to the Finance Officer (24) at the local VA office to determine whether the veteran has any VA benefit-related indebtedness. If a debt is found to exist, the home loan must not be closed until the veteran presents evidence showing that the debt has been cleared or an acceptable repayment plan has been established with VA. After completion by the Finance Officer, this form will be returned to the lender at the address shown. VA Form 26-8937 is a required exhibit to accompany home or manufactured home loans closed on the automatic basis and prior approval submissions.

1. NAME OF VETERAN (First, middle, last)

2. CURRENT ADDRESS OF VETERAN

3. DATE OF BIRTH

4. VA CLAIM FOLDER NUMBER (C-File No.)

5. SERVICE NUMBER

6. SOCIAL SECURITY NUMBER

I HEREBY CERTIFY THAT I ☐ DO ☐ DO NOT have a VA benefit-related indebtedness to my knowledge. I authorize VA to furnish the information listed below.

7. SIGNATURE OF VETERAN

8. DATE SIGNED

FOR VA USE ONLY

☐ The above named veteran does not have a VA benefit-related indebtedness

☐ The veteran has the following VA benefit-related indebtedness

VA BENEFIT-RELATED INDEBTEDNESS (If any)

TYPE OF DEBT(S)	AMOUNT OF DEBT(S)
	\$
	\$
	\$

TERM OF REPAYMENT PLAN (If any)

- ☐ Veteran is exempt from funding fee due to receipt of service-connected disability compensation of \$ _____ monthly. (Unless checked, the funding fee receipt must be remitted to VA with VA Form 26-1820, Report and Certification of Loan Disbursement)
- ☐ Veteran is not exempt from funding fee due to receipt of nonservice-connected pension of \$ _____ monthly. **LOAN APPLICATION WILL REQUIRE PRIOR APPROVAL PROCESSING BY VA**
- ☐ Veteran has been rated incompetent by VA. **LOAN APPLICATION WILL REQUIRE PRIOR APPROVAL PROCESSING BY VA**
- ☐ Insufficient information. VA cannot identify the veteran with the information given. Please furnish more complete information, or a copy of a DD Form 214 or discharge papers. If on active duty, furnish a statement of service written on official government letterhead, signed by the adjutant, personnel officer, or commanding officer. The statement should include name, birth date, service number, entry date and time lost

SIGNATURE OF AUTHORIZED AGENT

DATE SIGNED

RESPONDENT BURDEN: VA may not conduct or sponsor, and respondent is not required to respond to this collection of information unless it displays a valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have comments regarding this burden estimate or any other aspect of this collection of information, call 1-800-827-1000 for mailing information on where to send your comments.